



**REVOCATION OF POWER OF
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|------------------------|---------------------|
| Application Number | 09/887,391 |
| Filing Date | 6/22/2001 |
| First Named Inventor | Russell H. Fish III |
| Art Unit | 2157 |
| Examiner Name | Nano, Saragon |
| Attorney Docket Number | |

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

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OR

| | | | |
|---|-----------------------------|-------|------------------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Russell H. Fish III | | |
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---------------------|-----------|--------------|
| Signature | | | |
| Name | Russell H. Fish III | | |
| Date | 6/19/05 | Telephone | 972-702-0817 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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